

SONORA INDEPENDENT SCHOOL DISTRICT

TRAVEL REQUEST FORM

Revised 3/2024

Pay to the Order of: _____

Event/Location: _____

Departure Date: _____ Time: _____

Return Date: _____ Time: _____

Advancement for Meals (for overnight travel with students only):

_____ Breakfasts @ \$8 _____ Lunches @ \$12 _____ Dinners @ \$18 \$ _____

PO # _____

of meals dependent on time of departure/return

Advancement for Lodging (for overnight travel with students or staff travel > 2 nights only):

Lodging: # of Days _____ @ \$ _____ per day \$ _____

LODGING PAYABLE TO _____ PO # _____

Date Vehicle Request Submitted to Bus Barn: _____

Plane Fare: \$ _____

PLANE FARE PAYABLE TO _____ PO # _____

TOTAL AMOUNT TO BE ADVANCED \$ _____

Dates checks needed/other notes: _____

I have received, read and understand the travel guidelines of Sonora ISD.

Traveler's Signature

Date

Approved by (Principal and/or Supervisor)

Date